

APPLICATION FOR MECHANICAL AMUSEMENT DEVICE PERMIT & OCC. TAX PAID

LICENSE YEAR: JUNE 1 THRU MAY 31

DATE _____

Please PRINT using blue or black ink only.

LMC Chapter 5.26

APPLICANT'S NAME _____ STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

() _____
PHONE

AGE (19 YRS. OR OLDER) _____

NO PRORATION OF FEES

PT = POOL TABLE
MA = OTHER MECH. AMUSEMENT
KR = KIDDIE RIDE

SB = SHUFFLEBOARD
MM = MUSIC MACHINES

LOCATION OF WHERE MACHINES ARE PLACED INFORMATION			WRITE IN # OF MACHINES AT EACH LOCATION							
NAME	STREET ADDRESS	ZIP CODE	\$10 KR	\$25 PT	\$25 SB	\$50 MA	\$10 MM	SUB TOTAL	PERMIT FEE \$25 PER LOCATION	TOTAL AMT. DUE

AMOUNT PD. _____

APPLICANT SIGNATURE _____

RETURN TO: CITY CLERK'S OFFICE, 555 S. 10TH ST., LINCOLN NE 68508

Applications are available on the City's web site at "www.lincoln.ne.gov".

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